

MULTIPLE DEFENDANT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.

FILING DATE

APPLICANT(S)

101048023

CLAIMS

AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		IND.	DER.	IND.	DER.	IND.	DER.
	IND.	DER.	IND.	DER.						
1	/				51					
2	/				52					
3	/				53					
4	/				54					
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44					94					
45					95					
46					96					
47					97					
48					98					
49					99					
50					100					
TOTAL IND.	2				TOTAL IND.					
TOTAL DER.	2				TOTAL DER.					
TOTAL CLAIMS	4				TOTAL CLAIMS					

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS